

**Guide for Use of the
U.S. Army Soldier and Leader Risk Reduction Tool
(USA SLRRT)**

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

Contents

	<u>Page</u>
A. Purpose	3
B. References	3
C. Glossary	3
D. The USA SLRRT	3
E. Responsibilities	3
F. Policies and Procedures	7
G. Summary	10

A. Purpose.

This implementation manual provides guidance for the use of the U.S. Army Soldier and Leader Risk Reduction Tool (USA SLRRT). The implementation manual is to be used in conjunction with Field Manual (FM) 6-22: Army Leadership, Appendix B: Counseling and should be used during developmental counseling sessions.

The purpose of the USA SLRRT is to use the questions as a guide to facilitate a conversation between the leader and Soldier and connect both to appropriate resources when necessary.

B. References.

Required and related publications and prescribed and referenced forms are listed in [Appendix A](#).

C. Glossary of Abbreviations and Special Terms.

Abbreviations and special terms used in this manual are explained in the [Glossary](#).

D. The USA SLRRT.

1. The USA SLRRT is to be used to facilitate dialogue between the Soldier and leader, and connect both to appropriate resources when necessary.
2. Leaders should use the USA SLRRT along with other sources of information such as personal observations, reliable reporting sources, and past counseling sessions/interviews to help determine a Soldier's level of functioning. The USA SLRRT serves as a guide during the developmental counseling process and is not to be used as a single measure of a Soldier's level of functioning or to predict high risk behaviors.
3. The USA SLRRT focuses on the Soldier's level of functioning in six key domains: 1) physical; 2) emotional/behavioral; 3) occupational; 4) social/interpersonal; 5) financial; and 6) legal/disciplinary. These key domains are inter-related and may positively or negatively affect the Soldier's functioning.
4. The USA SLRRT is to be used in accordance with (IAW) the guidelines identified in this implementation guide.

E. Responsibilities.

1. Commanders/Commandants/Directors of major subordinate organizations (MSOs), special activities and field operating activities, schools and centers should:
 - a. Define 'first line leader' in terms of pay grade (e.g., E5, E6, E7, etc.) or position.

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

b. Ensure compliance with the guidance provided in this implementation manual, IAW Army Regulation (AR) 623-3, and FM 6-22.

c. Provide guidance to first line leaders on using the USA SLRRT when completing the DA 4856 (Developmental Counseling Form). The Privacy Act prohibits use of the USA SLRRT as a form to collect and retain data on individuals due to lack of a System of Records Notice (SORN). Leaders should document pertinent findings and actions on the DA 4856 (Developmental Counseling Form) and will not use the USA SLRRT for retaining information on individual Soldiers.

d. Ensure Soldiers are knowledgeable on the six key domains of functioning outlined in paragraph D.3 (i.e., physical, emotional/behavioral, occupational, social/interpersonal, financial, and legal/disciplinary) and the corresponding community resources (e.g., NCO support channel, Chain of Command, Unit Chaplain, Military and Family Life Counselors, Army Community Services, Unit Behavioral Health Team, Military OneSource, etc.). See AR 350-1 paragraph G-23, and [Appendix B](#) of this manual for information on community resources.

e. Incorporate the basic tenets of this manual within implementing directives published at their organization, school, or activity.

f. During Permanent Change of Station (PCS), complete the following:

(1) Verify the gaining unit or organization and a Point of Contact (POC).

(2) Ensure the gaining command's POC is knowledgeable regarding the Soldier's level of functioning as of the last developmental counseling session IAW AR 380-5, paragraph 5-5; and AR 25-2, paragraph 4-5.

2. First line leaders should:

a. Conduct counseling sessions addressing the domains identified on the USA SLRRT with all Soldiers for whom they are responsible IAW paragraph F: Policies and Procedures of this manual.

b. Be knowledgeable on the six key domains of functioning (physical, emotional/behavioral, occupational, social/interpersonal, financial, and legal/disciplinary) and appropriate resources (See AR 350-1, paragraph G-23f for resources).

c. Counseling sessions which address the domains covered on the USA SLRRT should be conducted:

(1) Within 30 days of arrival at the current permanent duty station.

(2) For Soldiers reporting for Initial Military Training (IMT), assess within 14 days of the course start date and during the last week of training for each phase of IMT

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

(e.g., basic combat training (BCT), advanced individual training (AIT), one station unit training (OSUT), warrant officer basic course (WOBC), basic officer leader's course (BOLC) A, and/or BOLC-B).

(3) Prior to attendance at Noncommissioned Officer Education System (NCOES), advanced leader courses (ALC) and senior leader courses (SLC), officer advanced courses (OAC), WOBC, and BOLC-B.

(4) Approximately 90 days prior to deployment.

(5) Within 30 days of returning to duty after deployment.

(6) For Reserve Officers Training Corps (ROTC) cadets within 30 days of start of each new school year. ROTC cadets reporting for their first year of school should be assessed upon their arrival.

(7) When Soldiers are administratively removed from a school and returned to the unit or organization.

(8) For non-IMT Soldiers who previously scored a moderate or high risk rating (with no subsequent low risk assessment), 120 days prior to PCS.

(9) When leaders determine the Soldier would benefit from an assessment because of changes or transitions in the Soldier's personal or professional life or when the leader identifies a risky behavior.

(10) At least annually to ensure that low risk Soldiers have not elevated to moderate or high risk.

d. Explain to the Soldier the USA SLRRT is a tool used during developmental counseling to develop a comprehensive picture of the health and welfare of Soldiers and to manage and mitigate risk factors. The USA SLRRT will not be stored and maintained. Pertinent findings and actions should be transferred to a Developmental Counseling Form (DA Form 4856). The Developmental Counseling Form will be stored and maintained in a manner consistent with the Privacy Act.

e. Follow proper rights warning procedure. The tool contains questions that may elicit responses from Soldiers that may cause a leader to suspect a Soldier has been involved in misconduct or other illegal activity. During the course of conducting the counseling, if a leader suspects that the Soldier has committed a crime or the leader receives information during the interview, the leader must do the following: 1) Stop questioning the Soldier; inform him/her of the offense for which you now suspect him/her of committing and advise the Soldier of his/her Article 31 Rights in accordance with DA Form 3881. Consult the supporting legal office. See [Appendix C](#) for the DA Form 3881 and consult your local SJA for assistance completing the form as the situation requires.

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

f. Follow DOD Directive 6490.1 (Guidance regarding Mental Health Evaluation of Members of the Armed Forces), which specifies that no person may refer a Service member for behavioral health evaluation as a reprisal for making or preparing a lawful communication to a Member of Congress, any appropriate authority in the chain of command of the Service member, an IG or a member of a DoD audit, inspection, investigation or law enforcement organization. Also, no person may restrict a Service member from lawfully communicating with an IG, attorney, Member of Congress, or other person about the Service member's referral for a behavioral health evaluation.

g. Ensure safety first. Any Soldier identified as a potential harm to himself or others should immediately be escorted to the installation behavioral health clinic or Military Treatment Facility (MTF) Emergency Room, as appropriate, and the Chain of Command should be notified.

h. Determine level of risk. Deciding whether a Soldier is low, moderate, or high risk is at the discretion of the leader and should be based on use of the USA SLRRT in combination with other sources of information such as personal observations, reliable reporting sources, and past counseling sessions/interviews. When in doubt about a Soldier's level of risk always seek advice from the chain of command. The following criteria may be used as a guideline to determine a Soldier's level of risk:

(1) Low: Soldier has no significant problems or has problems for which he/she is receiving appropriate support. The potential for adverse outcomes appears to be low.

(2) Moderate: Behaviors or concerns are identified that place the Soldier at risk of serious problems if not addressed through appropriate actions (e.g., Soldier experiencing financial, legal, family/relationship, alcohol or other concerns, and is experiencing difficulty getting adequate assistance, Soldier exhibiting a pattern of risk-taking behavior, Soldier engaging in potentially hazardous recreational activities without taking safety precautions). Senior leadership (Battalion commander/equivalent or higher) should be notified through the Chain of Command.

(3) High: Behaviors or concerns are identified that potentially place the Soldier or others in danger or harm's way (e.g., life threatening risk-taking behavior, serious performance problems that jeopardize teammates' safety, threat to self or others). Senior leadership (Battalion commander/equivalent or higher) should be notified immediately through the Chain of Command.

i. Develop an action plan. In conjunction with the Soldier, develop an action plan for obtaining appropriate support to increase the Soldier's level of functioning across the six domains.

j. Document identified concerns and planned actions on the DA 4856.

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

3. Soldiers should:

- a. Participate in a discussion with their leader using the questions from the USA SLRRT IAW his/her first line leader's guidance.
- b. Be knowledgeable on the six key domains which may contribute to his/her level of functioning (physical, emotional/behavioral, occupational, social/interpersonal, financial, and legal/disciplinary).
- c. In conjunction with their first line leader, determine his/her strengths and weaknesses associated with the six key domains of functioning.
- d. Develop an action plan. In conjunction with their first line leader, develop an action plan for obtaining the appropriate support to increase his/her level of functioning across the six domains.

F. Policies and Procedures.

1. Recognizing difficulties and assisting Soldiers is a key component of leadership. All leaders should use the USA SLRRT as part of the counseling process to facilitate a conversation with their Soldiers to aid in recognizing risk factors and assisting Soldiers in identifying appropriate resources and ensuring that Soldiers can adequately access the resources.

2. Preparation. IAW FM 6-22, successful counseling requires preparation in the following seven areas: selecting a suitable place, scheduling the time, notifying the subordinate well in advance, organizing the information, outlining the counseling session component, planning the counseling strategy, and establishing the right atmosphere.

3. Counseling Techniques. The leader does not need to have formal counseling training to use the USA SLRRT. If necessary, the leader should connect the Soldier to appropriate resources for professional counseling. Appendix B-25 (*The Qualities of a Counselor*) outlined in FM 6-22 identifies several approaches that will assist leaders in developing successful counseling techniques and procedures. Adapting the ratio of close-ended questions (those that result in yes or no responses) and open-ended questions (those that result in more information and conversation) will help the Leader and the Soldier to collaboratively develop an appropriate plan of action. For counseling guidance, refer to Appendix B-25 (*The Qualities of a Counselor*) of FM 6-22.

4. Process. The overall USA SLRRT process is as follows:

- a. IAW FM 6-22, The Qualities of the Counselor (Appendix B-25), when counseling a successful leader *knows what information to keep confidential and what to present to the chain of command*. This tool has been developed to assist the leader in

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

determining what information must be brought to the chain of command, what information is to be conveyed on a need-to-know basis, and what information is to be kept between the leader and the Soldier. *Extending influence beyond the chain of command and fostering a positive environment are both building blocks within the Core Leaders Competencies (FM 6-22 Appendix A).* A primary function for both of these building blocks is a leader's ability to build trust. A key part to building trust and maintaining full confidentiality or limited confidentiality is ensuring that all counseling documents are secured in order to protect the privacy of the individual being counseled.

b. First line leaders should review the questions on the USA SLRRT with their Soldiers and determine the appropriate response.

c. The leader should use open-ended questions to gather further information from the Soldier. Based on answers to these questions, the leader should determine the Soldier's risk level.

(1) For Soldiers who are on assignment instructions and have been identified as being at moderate risk, losing commanders (battalion level/equivalent or above) should inform gaining commanders via an encrypted email message no later than 30 days before the transfer.

(2) For Soldiers who are on assignment instructions and have been identified as being at high risk, commanders (battalion level/equivalent or above) should work with Human Resource Command (HRC) to defer or delete the assignment instructions.

(3) Once a battalion/equivalent or higher level commander determines that the Soldier who has been at high risk has had that risk mitigated to moderate or low risk, the battalion/equivalent or higher level commander should work with HRC on the Soldier's assignment instructions.

(4) Senior Commanders should not allow Soldiers who are at high risk to depart on a PCS to another installation.

d. Soldiers and leaders should work together to develop appropriate courses of action. Where applicable, the leader should facilitate receipt of appropriate resources.

5. Recommended Actions. Leaders should reference Table 5-1, Leadership Recommended Actions, to determine courses of action for each risk level. The scientific literature does not endorse attempting to predict outcomes or calculating risk based solely on this type of counseling. Rather, the USA SLRRT is used to consistently facilitate a dialogue between the Soldier and the leader. Determining a Soldier's level of risk should be decided based on use of the USA SLRRT in combination with other sources of information such as personal observations, reliable reporting sources, and past counseling sessions/interviews. See paragraph 2g above for further guidance.

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

- a. The command team must be informed when the Soldier discloses:
 - Thoughts of or a plan for self injury.
 - Thoughts of or a plan to injure others.
 - Physical altercation with their spouse or significant other.
 - Violations of UCMJ.
- b. The command team needs to have situational awareness when the Soldier discloses concerns with:
 - Marital or family difficulties.
 - Increases in alcohol use.
 - Mood changes or increased agitation.
 - Declining sleep quality.
 - Financial problems.
 - Physical issues that are not improving.
 - Civil legal issues.
- c. Examples of situations that leader would monitor, provide mentorship and/or referral counseling include Soldier concerns with:
 - Work issues.
 - Personal issues.
 - Issues with others.
 - Pay difficulties.
 - Basic financial management skills.
 - Basic child care concerns or issues.
 - PCS or ETS issues.
 - General legal needs

Table 5-1. Leadership Recommended Actions.

Risk Level	Recommended Actions
Low	First line leader awareness of low risk Soldier and any differences in observation
	First line leader and Soldier work together to determine if resources are necessary to resolve issues
	First line leader should monitor Soldier for changes to the factors and reassess as necessary
Moderate or High	Senior leadership (Battalion commander/equivalent or higher) notified of moderate risk Soldier through the Chain of Command
	First line leader and Senior leadership discuss issues in order to develop action plan
	First line leader should monitor Soldier for changes and reassess as necessary

G. Summary. This guide and the USA SLRRT are not intended to be used as a single measure of a Soldier's characteristics. They are intended to augment the counseling process. Leaders should use this supplemental guidance along with other sources of information such as personal observations, reliable reporting sources, and past counseling sessions/interviews to help determine a Soldier's level of functioning.

Appendix A: References

A. Required Publications.

AR 25-2
Information Assurance

AR 25-55
The Department of Army Freedom of Information Act Program

AR 25-400-2
The Army Records Information Management System (ARIMS)

AR 40-66
Medical Record Administration and Healthcare Documentation

AR 340-21
The Army Privacy Act

AR 350-1
Army Training and Leader Development

AR 380-5
Information Security

AR 600-8-104
Military Personnel Information Management/Records

AR 600-20
Army Command Policy

AR 600-63
Army Health Promotion

AR 601-280
Army Retention Program

DOD Directive 6490.1
Mental Health Evaluations of the Members of the Armed Forces

DOD Directive 6490.2E
Comprehensive Health Surveillance

DOD Instruction 6490.03
Deployment Health

Appendix A: References (cont.)

DOD Instruction 6490.4
Requests for Mental Health Evaluations of Members of the Armed Forces

B. Related Publications.

10 U.S.C. 3013
Secretary of the Army

10 U.S.C. 3583
Requirement of Exemplary Conduct

AR 623-2
Evaluation Reporting System

Field Manual 6-22
Army Leadership

C. Referenced Forms.

DA Form 3881
Rights Warning Procedure/Waiver Certificate

DA Form 4856
Developmental Counseling Form

Appendix B: Resource Guide

This resource guide is organized into General and Specific Resources for all components of the Army followed by resources specific to the Reserve Component. In addition to the General and Specific Resources listed below, please note that each installation has a Community Health Promotion Council led by a Community Health Promotion Officer. The Council publishes a Community Resource Guide that contains a variety of helpful resources specific to the geographic location. Contact the Health Promotion Officer at your installation for a copy of the guide.

A. General Resources for all Army Components - The following resources are general, universal resources that are useful for many problems/stressors across all components of the Army:

1. Army Community Services (check with ACS for occupational specific services)
2. Chain of Command
3. Department of Veterans Affairs Help Line (1-888-457-4838)
4. Military and Family Life Counselors
5. Military Crisis Line (1-800-273-8255)
6. Military OneSource (1-800-342-9647)
7. National Suicide Hotline (1-800-273-TALK)
8. NCO Support Channel
9. Outpatient Behavioral Health Services
10. Unit Behavioral Health team
11. Unit Chaplain
12. Unit Master Resiliency Trainer
13. www.mentalhealth.va.gov

B. Specific Resources for all Army Components - The following resources are grouped by the type of stressor (e.g., behavioral/emotional, financial, legal, etc.) and should be used in addition to the General Resources above.

1. Behavioral/Emotional
 - (a) Department of Veterans Affairs Help Line (1-888-457-4838)
 - (b) Family Life Chaplain
 - (c) Military Crisis Line (1-800-273-8255)
 - (d) Military and Family Life Counselors
 - (e) Military OneSource (1-800-342-9647)
 - (f) National Suicide Hotline (1-800-273-TALK)
 - (g) Outpatient Behavioral Health Services
 - (h) Unit Behavioral Health team
 - (i) Unit Chaplain
 - (j) Unit Master Resiliency Trainer
 - (k) www.mentalhealth.va.gov

Appendix B: Resource Guide (cont.)

2. Financial
 - (a) BDE/BN Command Financial Specialist
 - (b) Installation Finance Office
 - (c) Unit Finance Officer
3. Legal
 - (a) Judge Advocate General's (JAG) Office
4. Occupational
 - (a) Equal Opportunity Representative
5. Physical
 - (a) Battalion Aid Station
 - (b) Military and Family Life Counselor
 - (c) Outpatient Behavioral Health
 - (d) Primary Care Manager (MTF)
 - (e) Sick Call
 - (f) Unit Medic
6. Social/Interpersonal
 - (a) Domestic Violence
 - (1) Family Advocacy
 - (2) Victim Advocate
 - (b) Marital/Family
 - (1) Family Advocacy
 - (2) Family Life Chaplain
 - (3) Social Work Services
 - (c) Substance Abuse
 - (1) Army Center for Substance Abuse Program

C. Army Reserve Resources - The following resources are specific to the Army Reserve Component and are grouped by the type of stressor (e.g., behavioral/emotional, financial, legal, etc.). These resources should be used in addition to the General Resources above.

1. Behavioral/Emotional
 - (a) Department of Health/Mental Health for health insurance assistance
 - (b) Department of Veterans Affairs (VA) for support services if eligible

Appendix B: Resource Guide (cont.)

2. Financial

- (a) Army Emergency Relief (1-866-878-6378 if on AD >30 days)
- (b) Department of Social Services for temporary financial assistance
- (c) Employer Partnership of the Armed Forces www.employerpartnership.org
- (d) Local Department of Labor for jobs search
- (e) Money Matters Program at AR Family Programs (1-866-345-8248)
- (f) Military One Source (1-800-342-9647)

3. Legal

- (a) Judge Advocate General's (JAG) Office

4. Physical

- (a) Department of Health/Mental Health for health insurance assistance
- (b) Primary Care Physician
- (c) State Medicaid Office
- (d) Department of Veterans Affairs (VA) for support services if eligible
- (e) Warrior Transition Unit

5. Social/Interpersonal

- (a) Domestic Violence
 - (1) Army Reserve Family Programs (1-866-345-8248)
- (b) Marital/Family
 - (1) Army Reserve Family Programs (1-866-345-8248)
 - (2) Department of Veterans Affairs (VA) for support services if eligible
- (c) Substance Abuse
 - (1) Army Reserve Family Programs (1-866-345-8248)
 - (2) Department of Health/Mental Health for health insurance assistance
 - (3) Department of Veterans Affairs (VA) for support services if eligible

Appendix C: DA Form 3881, Rights Warning Procedure/Waiver Certificate

A. Completing DA Form 3881. Complete DA Form 3881, Rights Warning Procedure/Waiver Certificate if a leader suspects that the Soldier has committed a

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

crime. Form instructions are on the second page. DA Form 3881 is located at <http://www.apd.army.mil/pub/eforms/pdf/a3881.pdf>.

B. Consult the Supporting Legal Office. Consult the supporting legal office for additional clarification of how to complete DA Form 3881.

Appendix C: DA Form 3881, Rights Warning Procedure/Waiver Certificate (cont.)

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE <small>For use of this form, see AR 190-30; the proponent agency is ODCSOPS</small>			
DATA REQUIRED BY THE PRIVACY ACT			
AUTHORITY: Title 10, United States Code, Section 3012(g) PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified. ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval. DISCLOSURE: Disclosure of your Social Security Number is voluntary.			
1. LOCATION	2. DATE	3. TIME	4. FILE NO.
5. NAME (Last, First, MI)	8. ORGANIZATION OR ADDRESS		
6. SSN	7. GRADE/STATUS		
PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE			
Section A. Rights			
The investigator whose name appears below told me that he/she is with the United States Army _____ _____ and wanted to question me about the following offense(s) of which I am suspected/accused: _____ Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights: 1. I do not have to answer any question or say anything. 2. Anything I say or do can be used as evidence against me in a criminal trial. 3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both. <div style="text-align: center;">- or -</div> (For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins. 4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.			
5. COMMENTS (Continue on reverse side)			
Section B. Waiver			
I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.			
WITNESSES (If available)		3. SIGNATURE OF INTERVIEWEE	
1a. NAME (Type or Print)			
b. ORGANIZATION OR ADDRESS AND PHONE	4. SIGNATURE OF INVESTIGATOR		
2a. NAME (Type or Print)	5. TYPED NAME OF INVESTIGATOR		
b. ORGANIZATION OR ADDRESS AND PHONE	6. ORGANIZATION OF INVESTIGATOR		
Section C. Non-waiver			
1. I do not want to give up my rights <input type="checkbox"/> I want a lawyer <input type="checkbox"/> I do not want to be questioned or say anything			
2. SIGNATURE OF INTERVIEWEE			
ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED			

DA FORM 3881, NOV 89

EDITION OF NOV 84 IS OBSOLETE

USAPA 2.01

Glossary

A. Abbreviations.

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

AIT	advanced individual training
ALC	advanced leader course
AR	Army regulation
BCT	basic combat training
BOLC	basic officer leaders course
CFA	current files area
FOUO	for official use only
IAW	in accordance with
IDA	initial denial authority
IMT	initial military training
NCOES	Noncommissioned Officer Education System
OSUT	one station unit training
PII	personally identifiable information
PRT	physical readiness training
ROTC	Reserve Officers' Training Corps
SLC	senior leader course
UCMJ	Uniform Code of Military Justice
WOBC	warrant officer basic course

B. Special Terms.

Risk: Commanders should consider a Soldier at a higher risk when he/she exhibits behavior that places the individual or others in danger or consequences that negatively impact personal, work, health, and/or relationships. A high risk event is high risk behavior with a serious outcome often resulting in leadership, law enforcement, and/or medical intervention (e.g., attempted suicide, sexual assault, workplace violence, etc). Even using these definitions, it remains with commander who ultimately assesses the Soldier based on his/her knowledge of their actions and activities to determine if the Soldier should be placed in a higher risk category.

1. High Risk: Behaviors or concerns that potentially place the Soldier or others in danger or harm's way (e.g., life threatening risk taking behavior, serious performance problems that jeopardize teammates safety, threat to self or others).

2. Medium Risk: Behaviors or concerns that place the Soldier at risk of serious problems if not addressd through appropriate actions (e.g., Soldier experiencing financial, legal, family/relationship, alcohol or other concerns, and is experiencing difficulty getting adequate assistance, Soldier exhibiting a pattern of risk taking behavior, Soldier engaging in potentially hazardous recreational activities without taking safety precautions).

3. Low Risk: Soldier has no significant problems or has problems for which he/she is receiving appropriate support. The potential for adverse outcomes appears to be low.

Glossary (cont.)

Guide for Use of the U.S. Army Soldier and Leader Risk Reduction Tool

4. First line leaders: First line leaders are the individuals responsible for direct oversight, mentoring, guidance, and motivation of Soldiers. They are noncommissioned officers (including corporals/E-4), warrant officers, commissioned officers, or Army civilian leaders who serve in direct leadership positions and are accountable for the actions of the Soldiers assigned under them. Some of the common leadership positions include, but are not limited to, team leader, squad leader, platoon sergeant, platoon leader, noncommissioned officers in charge, officers in charge, section chief, first sergeants, sergeants major, executive officer, company commander, etc. The USA SLRRT may be used for Soldiers who work for various levels of leadership, so it is important to understand that first line leaders may even include general officers.